

County: Abbeville

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

ABBEVILLE AREA MEDICAL CENTER	Abbeville / County	25
420 THOMSON CIR	PO BOX 887	
ABBEVILLE, SC 29620-5656 FAC.#:864-366-5011	ABBEVILLE, SC 29620-0887	
OSMUS, RICH PH#: 864-366-5011	ABBEVILLE COUNTY MEMORIAL HOSPITAL	
Facility Email: ROSMUS@ABBEVILLEAREAMC.COM	HTL-0899 / 07/31/2014	

Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
 Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 25

Number of Activities/Facilities licensed in county of	<u>Abbeville</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>25</u>

County: Aiken

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

AIKEN REGIONAL MEDICAL CENTERS	Aiken / Corporation	245
302 UNIVERSITY PKWY	302 UNIVERSITY PKWY	
AIKEN, SC 29801-6302 FAC.#:803-641-5189	AIKEN, SC 29801-2792	
MILANES, CARLOS PH#: 803-641-5383	AIKEN REGIONAL MEDICAL CENTERS LLC	
Facility Email: CARLOS.MILANES@UHSINC.COM	HTL-0152 / 11/30/2014	

Licensed Beds: General: 183 Psychiatric: 44 Rehab: 0 Substance Abuse: 18
 Other Beds : NICU: 0 Neonatal Special Care: 8

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 245

Number of Activities/Facilities licensed in county of	<u>Aiken</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>245</u>

County: Allendale

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

ALLENDALE COUNTY HOSPITAL	Allendale / County	25
1787 ALLENDALE FAIRFAX HWY	PO BOX 218	
FAIRFAX, SC 29827-9133 FAC.#:803-632-3311	FAIRFAX, SC 29827-0218	
HIATT, KEN PH#: 803-632-3311	ALLENDALE COUNTY HOSPITAL BOARD OF TRUSTEES	
Facility Email: ADMINKH@ACHOSPITAL.ORG	HTL-0041 / 04/30/2015	

Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), Critical Access Hospital

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 25

Number of Activities/Facilities licensed in county of	<u>Allendale</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>25</u>

County: Anderson

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ANMED HEALTH MEDICAL CENTER 800 N FANT ST ANDERSON, SC 29621-5793 FAC.#:864-512-1000 MILLER JR, JOHN A PH#: 864-512-1109 Facility Email: JERRY.PARRISH@ANMEDHEALTH.ORG	Anderson / Non-Profit Corporation 800 N FANT ST ANDERSON, SC 29621-5793 ANMED HEALTH HTL-0044 / 11/30/2014	461
Licensed Beds: General: 423 Psychiatric: 38 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Abortions, Trauma Center Level II, JCAHO Accredited

ANMED HEALTH REHABILITATION HOSPITAL 1 SPRING BACK WAY ANDERSON, SC 29621-2676 FAC.#:864-716-2600 SKRIPPS, MICHELE M PH#: 864-716-2600 Facility Email: MICHELE.SKRIPPS@HEALTHSOUTH.COM	Anderson / Ltd. Liability 1 SPRING BACK WAY ANDERSON, SC 29621-2676 ANMED ENTERPRISES INC/HEALTHSOUTH LLC HTL-0838 / 12/31/2014	55
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 55 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

ANMED HEALTH WOMEN'S AND CHILDREN'S HOSPITAL 2000 E GREENVILLE ST ANDERSON, SC 29621-1580 FAC.#:864-512-4801 MILLER JR, JOHN A PH#: 864-512-1000 Facility Email: HOPE.CAMPBELL@ANMEDHEALTH.ORG	Anderson / Non-Profit Corporation 2000 E GREENVILLE ST, ANMED HEALTH CAMPUS ANDERSON, SC 29621-1580 ANMED HEALTH HTL-0896 / 06/30/2015	72
Licensed Beds: General: 72 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 13		

Certifications: Abortions, Perinatal Level II, JCAHO Accredited

PATRICK B HARRIS PSYCHIATRIC HOSPITAL 130 HWY 252 ANDERSON, SC 29621-5054 FAC.#:864-231-2600 FLETCHER, JOHN F PH#: 864-231-2600 Facility Email: Not on File	Anderson / State PO BOX 2907 ANDERSON, SC 29622-2907 SC DEPARTMENT OF MENTAL HEALTH HTL-0503 / 11/30/2014	200
Licensed Beds: General: 0 Psychiatric: 200 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 4 Number Licensed Units: 788

Number of Activities/Facilities licensed in county of <u>Anderson</u>	# Lics: <u>4</u>
Number Licensed Units : <u>788</u>	

County: Barnwell

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

BARNWELL COUNTY HOSPITAL	Barnwell / Corporation	53
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811 REYNOLDS RD

BARNWELL, SC 29812-1555 FAC.#:803-541-4365

VALLIANT RN, MARY T PH#: 803-259-1000

RMC-BARNWELL HEALTHCARE INC

Facility Email: MVALLIANT@BCHOSPITAL.ORG

HTL-0485 / 06/30/2014

Licensed Beds: General: 53 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 53Number of Activities/Facilities licensed in county of Barnwell # Lics: 1Number Licensed Units : 53

County: Beaufort

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BEAUFORT MEMORIAL HOSPITAL 955 RIBAUT RD BEAUFORT, SC 29902-5454 FAC.#:843-522-5200 TOOMEY, RICHARD K PH#: 843-522-5200 Facility Email: DCRAWFORD@BMHSC.ORG	Beaufort / County 955 RIBAUT RD BEAUFORT, SC 29902-5454 BEAUFORT COUNTY MEMORIAL HOSPITAL HTL-0026 / 11/30/2014	197
Licensed Beds: General: 169 Psychiatric: 14 Rehab: 14 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 5		

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

HILTON HEAD HOSPITAL 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 FAC.#:843-689-8206 ONEIL, MARK PH#: 843-689-8206 Facility Email: KATHYL.CARTER@TENETHEALTH.COM	Beaufort / Limited Liability Limited Partnership 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 HILTON HEAD HEALTH SYSTEM LP HTL-0646 / 10/31/2014	93
Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 290

Number of Activities/Facilities licensed in county of	<u>Beaufort</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>290</u>

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BON SECOURS-ST FRANCIS XAVIER HOSPITAL 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414-5734 FAC.#:843-402-1000 CARROLL, ALLEN P PH#: 843-402-1006 Facility Email: ALLEN.CARROLL@RSFH.COM	Charleston / Non-Profit Corporation 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414-5734 BON SECOURS-ST FRANCIS XAVIER HOSPITAL INC HTL-0750 / 07/31/2014	204
Licensed Beds: General: 204 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 11		
Certifications:Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
CITADEL INFIRMARY 171 MOULTRIE ST, CITADEL INFIRMARY CHARLESTON, SC 29409-0001 FAC.#:843-953-6847 CAPELL, CAREY M PH#: 843-953-6847 Facility Email: CAREY.CAPELL@CITADEL.EDU	Charleston / State 171 MOULTRIE ST, THE CITADEL CHARLESTON, SC 29409-0001 BOARD OF VISITORS THE CITADEL HTL-0035 / 05/31/2015	38
Licensed Beds: General: 38 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
EAST COOPER MEDICAL CENTER 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 FAC.#:843-416-6210 ALEXANDER, JASON P PH#: 843-881-0100 Facility Email: JASON.ALEXANDER@TENETHEALTH.COM	Charleston / Corporation 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 EAST COOPER COMMUNITY HOSPITAL INC HTL-0447 / 03/31/2015	130
Licensed Beds: General: 130 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		
Certifications:Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON 9181 MEDCOM ST NORTH CHARLESTON, SC 29406-9184 FAC.#:843-820-7762 POWELL, TROY G PH#: 843-820-7777 Facility Email: TROY.POWELL@HEALTHSOUTH.COM	Charleston / Limited Liability 9181 MEDCOM ST NORTH CHARLESTON, SC 29406-9184 TRIDENT NEUROSCIENCES CENTER LLC HTL-0648 / 12/31/2014	49
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 49 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
MOUNT PLEASANT HOSPITAL 3500 HWY 17 N MOUNT PLEASANT, SC 29466-9123 FAC.#:843-724-2954 SULLIVAN, JOHN PH#: 843-724-2954 Facility Email: JOHN.SULLIVAN@RSFH.COM	Charleston / Non-Profit Corporation 3510 HWY 17 N STE 200 MOUNT PLEASANT, SC 29466-8229 ROPER ST FRANCIS MOUNT PLEASANT HOSPITAL HTL-0909 / 10/31/2014	85
Licensed Beds: General: 85 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:Perinatal Level I, JCAHO Accredited		

Division of Health Licensing

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MUSC MEDICAL CENTER 169 ASHLEY AVE CHARLESTON, SC 29425-8905 FAC.#:843-792-3232 CAWLEY MD, PATRICK J PH#: Facility Email: SMITHSTU@MUSC.EDU	Charleston / District 169 ASHLEY AVE CHARLESTON, SC 29425-8905 MEDICAL UNIVERSITY HOSPITAL AUTHORITY HTL-0811 / 11/30/2014	709
Licensed Beds: General: 604 Psychiatric: 82 Rehab: 0 Substance Abuse: 23 Other Beds : NICU: 16 Neonatal Special Care: 50		
Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited		
PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH 2777 SPEISSEGGER DR NORTH CHARLESTON, SC 29405-8229 FAC.#:843-747-5830 BAKER, SHARI PH#: 843-747-5830 Facility Email: SHARI.BAKER@UHSINC.COM	Charleston / Limited Liability 2777 SPEISSEGGER DR NORTH CHARLESTON, SC 29405-8229 PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC HTL-0729 / 08/31/2014	108
Licensed Beds: General: 0 Psychiatric: 92 Rehab: 0 Substance Abuse: 16 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
ROPER HOSPITAL 316 CALHOUN ST CHARLESTON, SC 29401-1125 FAC.#:843-724-2901 SEVERANCE, MATTHEW J PH#: 843-724-2901 Facility Email: MATT.SEVERANCE@RSFH.COM	Charleston / Non-Profit Corporation 316 CALHOUN ST CHARLESTON, SC 29401-1125 ROPER HOSPITAL INC HTL-0063 / 10/31/2014	368
Licensed Beds: General: 316 Psychiatric: 0 Rehab: 52 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:Trauma Center Level III, JCAHO Accredited		
SHERIFF AL CANNON DETENTION CENTER 3841 LEEDS AVE N CHARLESTON, SC 29405-7469 FAC.#:843-529-7300 BEATTY, WILLIS L PH#: Facility Email: LHICKS@CHARLESTONCOUNTY.ORG	Charleston / County 3841 LEEDS AVE NORTH CHARLESTON, SC 29405 CHARLESTON COUNTY SHERIFF'S OFFICE HTL-0908 / 06/30/2015	22
Licensed Beds: General: 22 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
TRIDENT MEDICAL CENTER 9330 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9104 FAC.#:843-847-4100 GALATI, TODD PH#: 843-797-7000 Facility Email: TODD.GALLATI@HCAHEALTHCARE.COM	Charleston / Ltd. Liability 9330 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9104 TRIDENT MEDICAL CENTER LLC HTL-0777 / 04/30/2015	310
Licensed Beds: General: 296 Psychiatric: 0 Rehab: 14 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		
Certifications:Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited		

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

VIBRA HOSPITAL OF CHARLESTON	Charleston / Limited Liability	59
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1200 HOSPITAL DR

MOUNT PLEASANT, SC 29464-3251 FAC.#:843-876-8340

MILLER, PAUL PH#: 843-876-8340

VIBRA HOSPITAL OF CHARLESTON LLC

Facility Email: PAUL.MILLER@KINDRED.COM

HTL-0764 / 08/31/2014

Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 11 Number Licensed Units: 2,082Number of Activities/Facilities licensed in county of Charleston # Lics: 11Number Licensed Units : 2,082

County: Cherokee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

NOVANT HEALTH GAFFNEY MEDICAL CENTER	Cherokee / Limited Liability	125
1530 N LIMESTONE ST	1530 N LIMESTONE ST	
GAFFNEY, SC 29340-4738 FAC.#:864-487-1500	GAFFNEY, SC 29340-4738	
YATES, BRIAN PH#: 864-487-1500	GAFFNEY HMA LLC	
Facility Email: PERICHARDS@NOVANTHEALTH.ORG	HTL-0476 / 05/31/2015	

Licensed Beds: General: 125 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
 Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>125</u>
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Number of Activities/Facilities licensed in county of <u>Cherokee</u>	# Lics: <u>1</u>
Number Licensed Units : <u>125</u>	

County: Chester

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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CHESTER REGIONAL MEDICAL CENTER	Chester / Limited Liability	82
1 MEDICAL PARK DR	1 MEDICAL PARK DR	
CHESTER, SC 29706-9776 FAC.#:803-581-3151	CHESTER, SC 29706-9776	
VAUGHAN, PAGE PH#: 803-581-3151	CHESTER HMA LLC	
Facility Email: PAGE.VAUGHAN@HMA.COM	HTL-0894 / 09/30/2014	

Licensed Beds: General: 82 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 82

Number of Activities/Facilities licensed in county of	<u>Chester</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>82</u>

County: Chesterfield

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

CHESTERFIELD GENERAL HOSPITAL	Chesterfield / Limited Liability	59
711 CHESTERFIELD HWY	Limited Partnership	
CHERAW, SC 29520-7002 FAC.#:843-537-7881	711 CHESTERFIELD HWY	
REECE, JERON PH#: 843-537-7881	CHERAW, SC 29520-7002	
	CHESTERFIELD/MARLBORO LP	
Facility Email: JEFF_REECE@CHS.NET	HTL-0681 / 03/31/2015	

Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 59

Number of Activities/Facilities licensed in county of	<u>Chesterfield</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>59</u>

County: Clarendon

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CLARENDON MEMORIAL HOSPITAL 10 E HOSPITAL ST MANNING, SC 29102-3153 FAC.#:803-435-8463 FRYE, EDWARD R PH#: 803-435-8463 Facility Email: DWHETSELL@CLARENDONHEALTH.COM	Clarendon / District PO BOX 550 MANNING, SC 29102-0550 CLARENDON HOSPITAL DISTRICT HTL-0012 / 07/31/2014	81
Licensed Beds: General: 81 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Swing Bed Unit(s), Perinatal Level I

TURBEVILLE CORRECTIONAL INSTITUTION INFIRMARY 1578 CLARENCE COKER HWY TURBEVILLE, SC 29162-9419 FAC.#:803-896-3100 BLACKWELL, STEPPNAY PH#: Facility Email: Not on File	Clarendon / State PO BOX 210382, SCDOC-ACCOUNTS PAYABLE COLUMBIA, SC 29221-0382 SC DEPT OF CORRECTIONS HTL-0901 / 10/31/2014	8
Licensed Beds: General: 8 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

Totals For Facility/License Type:Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 89

Number of Activities/Facilities licensed in county of	<u>Clarendon</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>89</u>

County: Colleton

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

COLLETON MEDICAL CENTER	Colleton / Corporation	135
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501 ROBERTSON BLVD

501 ROBERTSON BLVD

WALTERBORO, SC 29488-5714 FAC.#:843-782-2604

WALTERBORO, SC 29488-5714

GRIFFIN, BRADLEY M PH#: 843-782-2604

WALTERBORO COMMUNITY HOSPITAL INC

Facility Email: MARILYN.FRYAR@HCAHEALTHCARE.COM

HTL-0405 / 03/31/2015

Licensed Beds: General: 102 Psychiatric: 19 Rehab: 14 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 135Number of Activities/Facilities licensed in county of Colleton # Lics: 1Number Licensed Units : 135

County: Darlington

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CAROLINA PINES REGIONAL MEDICAL CENTER 1304 W BOBO NEWSOM HWY HARTSVILLE, SC 29550-4399 FAC.#:843-339-4611 BROWNE, TIMOTHY PH#: 000-000-0000 Facility Email: TIM.BROWNE@HMA.COM	Darlington / Limited Liability 1304 W BOBO NEWSOM HWY HARTSVILLE, SC 29550-4399 HARTSVILLE HMA LLC HTL-0904 / 04/30/2015	116
Licensed Beds: General: 116 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 4		

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

MCLEOD MEDICAL CENTER-DARLINGTON 701 CASHUA FERRY RD DARLINGTON, SC 29532-8488 FAC.#:843-777-1100 GODBOLD, PATRICIA J PH#: 843-777-1100 Facility Email: PGODBOLD@MCLEODHEALTH.ORG	Darlington / Non-Profit Corporation PO BOX 1859 DARLINGTON, SC 29540-1859 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HTL-0631 / 12/31/2014	72
Licensed Beds: General: 49 Psychiatric: 23 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Swing Bed Unit(s), JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 188

Number of Activities/Facilities licensed in county of	<u>Darlington</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>188</u>

County: Dillon

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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MCLEOD MEDICAL CENTER-DILLON 301 E JACKSON ST DILLON, SC 29536-2509 FAC.#:843-774-4111 LOCKLAIR, DEBORAH D PH#: 843-774-4111 Facility Email: DLOCKLAIR@MCLEODHEALTH.ORG	Dillon / Non-Profit Corporation PO BOX 1327 DILLON, SC 29536-1327 MCLEOD MEDICAL CENTER-DILLON INC HTL-0854 / 09/30/2014	79
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Licensed Beds: General: 79 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>79</u>
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Number of Activities/Facilities licensed in county of <u>Dillon</u>	# Lics: <u>1</u>
Number Licensed Units : <u>79</u>	

County: Dorchester

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LIEBER CORRECTIONAL INSTITUTION INFIRMARY 136 WILBORN AVE RIDGEVILLE, SC 29472-6351 FAC.#:803-896-3702 CONNELLY RN, STAR PH#:	Dorchester / State PO BOX 210382, SCDOC-ACCOUNTS PAYABLE COLUMBIA, SC 29221-0382 SC DEPT OF CORRECTIONS	10
Facility Email: Not on File HTL-0874 / 04/30/2015		
Licensed Beds: General: 10 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

SUMMERVILLE MEDICAL CENTER 295 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FAC.#:843-832-5101 VALENTINE, LISA MARIE PH#: 000-000-0000	Dorchester / Ltd. Liability 295 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 TRIDENT MEDICAL CENTER LLC	94
Facility Email: LOUIS.CAPUTO@HCAHEALTHCARE.COM HTL-0780 / 04/30/2015		
Licensed Beds: General: 94 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 4		

Certifications:Abortions, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type:Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 104

Number of Activities/Facilities licensed in county of	<u>Dorchester</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>104</u>

County: Edgefield

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

EDGEFIELD COUNTY HOSPITAL	Edgefield / County	25
300 RIDGE MEDICAL PLAZA RD, RIDGE MEDICAL PLAZA	300 RIDGE MEDICAL PLAZA RD, RIDGE MEDICAL PLAZA	
EDGEFIELD, SC 29824-4525 FAC.#:803-637-3174	EDGEFIELD, SC 29824-4525	
CLARY, BRANDON PH#:	EDGEFIELD COUNTY HOSPITAL BOARD	
Facility Email: BCLARY@MYECH.ORG	HTL-0479 / 03/31/2015	

Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
 Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 25

Number of Activities/Facilities licensed in county of	<u>Edgefield</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>25</u>

County: Fairfield

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

FAIRFIELD MEMORIAL HOSPITAL	Fairfield / County	25
102 US HWY 321 BYP N	PO BOX 620	
WINNSBORO, SC 29180-9251 FAC.#:803-635-5548	WINNSBORO, SC 29180-0620	
WILLIAMS, MICHAEL L PH#: 803-635-5548	FAIRFIELD MEMORIAL HOSPITAL (BOARD OF TRUSTEES)	
Facility Email: MICHAEL.WILLIAMS@FAIRFIELDMEMORIAL.COM	HTL-0154 / 11/30/2014	

Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 25

Number of Activities/Facilities licensed in county of	<u>Fairfield</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>25</u>

County: Florence

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CAROLINAS HOSPITAL SYSTEM 805 PAMPLICO HWY FLORENCE, SC 29505-6050 FAC.#:843-674-2500 CRAVEN, DARCY PH#: 843-674-2500 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM	Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC HTL-0761 / 11/30/2014	310
Licensed Beds: General: 310 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Trauma Center Level III, JCAHO Accredited

CAROLINAS HOSPITAL SYSTEM CEDAR TOWER 121 E CEDAR ST FLORENCE, SC 29506-2576 FAC.#:843-674-2500 CRAVEN, DARCY PH#: 843-674-2500 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM	Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC HTL-0782 / 11/30/2014	66
Licensed Beds: General: 0 Psychiatric: 12 Rehab: 42 Substance Abuse: 12 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

HEALTHSOUTH REHABILITATION HOSPITAL OF FLORENCE 900 E CHEVES ST FLORENCE, SC 29506-2704 FAC.#:843-673-7284 KING, THOM PH#: Facility Email: THOM.KING@HEALTHSOUTH.COM	Florence / Corporation 900 E CHEVES ST FLORENCE, SC 29506-2704 HEALTHSOUTH REHABILITATION CENTER INC HTL-0587 / 06/30/2014	88
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 88 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

LAKE CITY COMMUNITY HOSPITAL 258 N RON MCNAIR BLVD LAKE CITY, SC 29560-2462 FAC.#:843-374-2036 MCCUTCHEON JR, BUTCH PH#: 843-374-6120 Facility Email: IHANNA@LCCOSPITAL.ORG	Florence / District PO BOX 1479 LAKE CITY, SC 29560-1479 LOWER FLORENCE COUNTY HOSPITAL DISTRICT HTL-0897 / 05/31/2015	48
Licensed Beds: General: 48 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

County: Florence

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE 555 E CHEVES ST FLORENCE, SC 29506-2617 FAC.#:843-777-2000 SEGARS, MARIE G PH#: 843-777-2849 Facility Email: MSEGARS@MCLEODHEALTH.ORG	Florence / Non-Profit Corporation PO BOX 100551 FLORENCE, SC 29502-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HTL-0384 / 05/31/2014 (Renewal Pending)	453
Licensed Beds: General: 453 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 12 Neonatal Special Care: 28		

Certifications: Abortions, Trauma Center Level II, Perinatal Level III Regional, JCAHO
Accredited

REGENCY HOSPITAL OF FLORENCE 121 E CEDAR ST FL 4 FLORENCE, SC 29506-2576 FAC.#:843-661-3471 JONES, DARRELL PH#: 000-000-0000 Facility Email: Not on File	Florence / Ltd. Liability 4714 GETTYSBURG RD MECHANICSBURG, PA 17055-4325 REGENCY HOSPITAL COMPANY OF SOUTH CAROLINA LLC HTL-0824 / 09/30/2014	40
Licensed Beds: General: 40 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

WOMEN'S CENTER OF CAROLINAS HOSPITAL SYSTEM 1590 FREEDOM BLVD FLORENCE, SC 29505-6042 FAC.#:843-674-2500 CRAVEN, DARCY PH#: 843-674-2500 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM	Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC HTL-0674 / 12/31/2014	20
Licensed Beds: General: 20 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 11		

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 7 Number Licensed Units: 1,025

Number of Activities/Facilities licensed in county of	<u>Florence</u>	# Lics: <u>7</u>
	Number Licensed Units :	<u>1,025</u>

County: Georgetown

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GEORGETOWN MEMORIAL HOSPITAL 606 BLACK RIVER RD GEORGETOWN, SC 29440-3368 FAC.#:843-527-7000 BAILEY, BRUCE P PH#: 843-527-7000	Georgetown / Non-Profit Corporation PO BOX 421718 GEORGETOWN, SC 29442-4203 GEORGETOWN MEMORIAL HOSPITAL INC	131
Facility Email: A.TANNER@GIENDOCENTER.COM HTL-0007 / 08/31/2014		
Licensed Beds: General: 131 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 5		

Certifications: Perinatal Level II, JCAHO Accredited

WACCAMAW COMMUNITY HOSPITAL 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 FAC.#:843-652-1001 RESETAR, GAYLE L PH#: 843-651-8211	Georgetown / Non-Profit Corporation 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 WACCAMAW COMMUNITY HOSPITAL (INC)	167
Facility Email: GRESETAR@GEORGETOWNHOSPITALSYSTEM.ORG HTL-0834 / 10/31/2014		
Licensed Beds: General: 124 Psychiatric: 0 Rehab: 43 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 2		

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 298

Number of Activities/Facilities licensed in county of	<u>Georgetown</u>	# Lics: <u>2</u>
Number Licensed Units :		<u>298</u>

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CAROLINA CENTER FOR BEHAVIORAL HEALTH 2700 E PHILLIPS RD GREER, SC 29650-4815 FAC. #: 864-235-2335 WILLINGHAM, JOHN C PH#: 864-235-2335 Facility Email: JOHN.WILLINGHAM@UHSINC.COM	Greenville / Corporation 2700 E PHILLIPS RD GREER, SC 29650-4815 UHS OF GREENVILLE LLC HTL-0806 / 08/31/2014	130
Licensed Beds: General: 0 Psychiatric: 109 Rehab: 0 Substance Abuse: 21 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
GHS GREENVILLE MEMORIAL HOSPITAL 701 GROVE RD GREENVILLE, SC 29605-5611 FAC. #: 864-455-7114 JOHNSON, PAUL PH#: 864-455-8400 Facility Email: NSALLY@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0343 / 12/31/2014	845
Licensed Beds: General: 746 Psychiatric: 46 Rehab: 53 Substance Abuse: 0 Other Beds : NICU: 12 Neonatal Special Care: 68		
Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited		
GHS GREER MEMORIAL HOSPITAL 830 S BUNCOMBE RD GREER, SC 29650-2400 FAC. #: 864-797-8001 MANSURE, JOHN PH#: 864-848-8130 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200, SUNTRUST BLDG GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0906 / 08/31/2014	82
Licensed Beds: General: 82 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:Trauma Center Level III, Perinatal Level I, JCAHO Accredited		
GHS HILLCREST MEMORIAL HOSPITAL 729 SE MAIN ST SIMPSONVILLE, SC 29681-3280 FAC. #: 864-454-6151 BOUR MD, ERIC PH#: 864-454-6151 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0204 / 09/30/2014	43
Licensed Beds: General: 43 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
GHS NORTH GREENVILLE LONG TERM ACUTE CARE HOSPITAL 807 N MAIN ST TRAVELERS REST, SC 29690-1598 FAC. #: 864-455-9224 JOHNSON, PAUL PH#: 864-527-8500 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200, SUNTRUST BLDG GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0853 / 08/31/2014	45
Licensed Beds: General: 45 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GHS PATEWOOD MEMORIAL HOSPITAL 175 PATEWOOD DR GREENVILLE, SC 29615-3570 FAC.#:864-797-1000 PH#: Facility Email: PSAWICKI@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0900 / 06/30/2014	72
Licensed Beds: General: 72 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
REGENCY HOSPITAL OF GREENVILLE 1 SAINT FRANCIS DR 4TH FLOOR GREENVILLE, SC 29601-3999 FAC.#:864-255-1411 JAMES, STEPHANIE R PH#: 864-255-1401 Facility Email: SJAMES@REGENCYHOSPITAL.COM	Greenville / Ltd. Liability 4714 GETTYSBURG RD MECHANICSBURG, PA 17055-4325 REGENCY HOSPITAL OF GREENVILLE LLC HTL-0882 / 12/31/2014	32
Licensed Beds: General: 32 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
SHRINERS' HOSPITAL FOR CHILDREN 950 W FARIS RD GREENVILLE, SC 29605-4277 FAC.#:864-255-7942 ROMBERGER, RANDY PH#: Facility Email: RROMBERGER@SHRINENET.ORG	Greenville / Non-Profit Corporation 950 W FARIS RD GREENVILLE, SC 29605-4277 SHRINERS' HOSPITAL FOR CHILDREN INC HTL-0069 / 02/28/2015	50
Licensed Beds: General: 50 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
SPRINGBROOK BEHAVIORAL HEALTH SYSTEM 1 HAVENWOOD LN TRAVELERS REST, SC 29690-9447 FAC.#:864-834-8013 ROWLEY, MICHAEL PH#: 864-834-8013 Facility Email: LISA.MCJUNKIN@SPRINGBROOKBHS.COM	Greenville / Corporation PO BOX 1005 TRAVELERS REST, SC 29690-1005 CHESTNUT HILL MENTAL HEALTH CENTER INC HTL-0442 / 08/31/2014	44
Licensed Beds: General: 0 Psychiatric: 28 Rehab: 0 Substance Abuse: 16 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
ST FRANCIS-DOWNTOWN 1 SAINT FRANCIS DR GREENVILLE, SC 29601-3999 FAC.#:864-255-1000 NANTZ, MARK S PH#: 864-255-1000 Facility Email: STFRANCISHEALTH.ORG	Greenville / Corporation 1 SAINT FRANCIS DR GREENVILLE, SC 29601-3999 ST FRANCIS HOSPITAL INC HTL-0794 / 12/31/2014	245
Licensed Beds: General: 226 Psychiatric: 0 Rehab: 19 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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ST FRANCIS-EASTSIDE 125 COMMONWEALTH DR GREENVILLE, SC 29615-4812 FAC.#:864-675-4000 NANTZ, MARK S PH#: 864-255-1000 Facility Email: STFRANCISHEALTH.ORG	Greenville / Corporation 125 COMMONWEALTH DR GREENVILLE, SC 29615-4812 ST FRANCIS HOSPITAL INC HTL-0793 / 12/31/2014	93
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Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 10

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 11 Number Licensed Units: 1,681

Number of Activities/Facilities licensed in county of	<u>Greenville</u>	# Lics: <u>11</u>
	Number Licensed Units :	<u>1,681</u>

County: Greenwood

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREENWOOD REGIONAL REHABILITATION HOSPITAL 1530 PKWY GREENWOOD, SC 29646-4027 FAC.#:864-330-1800 TRAPNELL, KERRY PH#: 864-330-1800 Facility Email: TRAPNELLK@ERNESTHEALTH.COM	Greenwood / Ltd. Liability 1530 PKWY GREENWOOD, SC 29646-4027 GREENWOOD REGIONAL REHABILITATION HOSPITAL LLC HTL-0903 / 10/31/2014	42
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 42 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

SELF REGIONAL HEALTHCARE 1325 SPRING ST GREENWOOD, SC 29646-3875 FAC.#:864-725-4111 PFEIFFER, JAMES A PH#: 864-725-4111 Facility Email: CATHERINE.DEMMITT@SELFREGIONAL.ORG	Greenwood / County 1325 SPRING ST GREENWOOD, SC 29646-3875 GREENWOOD COUNTY HOSPITAL BOARD HTL-0038 / 12/31/2014	414
Licensed Beds: General: 354 Psychiatric: 36 Rehab: 0 Substance Abuse: 24 Other Beds : NICU: 7 Neonatal Special Care: 11		

Certifications:Abortions, Trauma Center Level III, Perinatal Level III, JCAHO Accredited

Totals For Facility/License Type:Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 456

Number of Activities/Facilities licensed in county of <u>Greenwood</u>	# Lics: <u>2</u>
Number Licensed Units : <u>456</u>	

County: Hampton

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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HAMPTON REGIONAL MEDICAL CENTER 595 W CAROLINA AVE VARNVILLE, SC 29944-4735 FAC.#:803-943-2771 HAMILL, DAVID H PH#: 803-943-2771 Facility Email: JALLEN@HAMPTONREGIONAL.ORG	Hampton / Non-Profit Corporation PO BOX 338 VARNVILLE, SC 29944-0338 HAMPTON REGIONAL MEDICAL CENTER (INC) HTL-0027 / 07/31/2014	32
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Licensed Beds: General: 32 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s)

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 32

Number of Activities/Facilities licensed in county of	<u>Hampton</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>32</u>

Division of Health Licensing

County: Horry

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CONWAY HOSPITAL 300 SINGLETON RIDGE RD CONWAY, SC 29526-9142 FAC.#:843-347-7111 CLAYTON, PHILIP A PH#: 843-347-8114 Facility Email: PCLAYTON@CMC-SC.COM	Horry / Non-Profit Corporation PO BOX 829 CONWAY, SC 29528-0829 CONWAY HOSPITAL INC HTL-0083 / 05/31/2015	210
Licensed Beds: General: 210 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 6		

Certifications:Perinatal Level II

GRAND STRAND REGIONAL MEDICAL CENTER 809 82ND PKWY MYRTLE BEACH, SC 29572-4611 FAC.#:843-692-1100 SIMS, MARK PH#: 000-000-0000 Facility Email: MARK.SIMS@HCAHEALTHCARE.COM	Horry / Ltd. Liability 809 82ND PKWY MYRTLE BEACH, SC 29572-4611 GRAND STRAND REGIONAL MEDICAL CENTER LLC HTL-0770 / 04/30/2015	269
Licensed Beds: General: 269 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 2		

Certifications:Trauma Center Level III, Perinatal Level II, JCAHO Accredited

LIGHTHOUSE CARE CENTER OF CONWAY ACUTE CARE 152 WACCAMAW MEDICAL PARK DR CONWAY, SC 29526-8901 FAC.#:843-347-8871 RYBA, TOM PH#: 843-347-8871 Facility Email: TOM.RYBA@UHSINC.COM	Horry / Corporation 152 WACCAMAW MEDICAL PARK DR CONWAY, SC 29526-8901 HHC SOUTH CAROLINA INC HTL-0898 / 01/31/2015	72
Licensed Beds: General: 0 Psychiatric: 59 Rehab: 0 Substance Abuse: 13 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

MCLEOD LORIS 3655 MITCHELL ST LORIS, SC 29569-2844 FAC.#:843-716-7000 TINSLEY, EDWARD D PH#: 843-777-2855 Facility Email: AGREEN@LORISHEALTH.ORG	Horry / Non-Profit Corporation PO BOX 690001 LORIS, SC 29569-9601 MCLEOD LORIS SEACOAST HOSPITAL HTL-0033 / 01/31/2015	105
Licensed Beds: General: 105 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Perinatal Level I, JCAHO Accredited

MCLEOD SEACOAST 4000 HWY 9 E LITTLE RIVER, SC 29566-7833 FAC.#:843-390-8100 TINSLEY, EDWARD D PH#: 843-777-2855 Facility Email: AGREEN@LORISHEALTH.ORG	Horry / Non-Profit Corporation PO BOX 690001 LORIS, SC 29569-9601 MCLEOD LORIS SEACOAST HOSPITAL HTL-0910 / 01/31/2015	50
Licensed Beds: General: 50 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

County: Horry

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 5 Number Licensed Units: 706

Number of Activities/Facilities licensed in county of	<u>Horry</u>	# Lics: <u>5</u>
	Number Licensed Units :	<u>706</u>

County: Jasper

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

COASTAL CAROLINA HOSPITAL	Jasper / Corporation	41
1000 MEDICAL CENTER DR	1445 ROSS AVE STE 1400	
HARDEEVILLE, SC 29927-3446 FAC.#:843-784-8000	DALLAS, TX 75202-2703	
TALBERT, BRADLEY S PH#: 843-876-8340	COASTAL CAROLINA MEDICAL CENTER INC	
Facility Email: JANE.BENNETT@TENETHEALTH.COM	HTL-0902 / 06/30/2015	
Licensed Beds: General: 41 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

Totals For Facility/License Type:Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 41

Number of Activities/Facilities licensed in county of	<u>Jasper</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>41</u>

County: Kershaw

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

KERSHAWHEALTH	Kershaw / County	121
1315 ROBERTS ST	PO BOX 7003	
CAMDEN, SC 29020-3737 FAC.#:803-432-4311	CAMDEN, SC 29021-7003	
WEEKS, DONNIE J PH#: 803-432-4311	KERSHAWHEALTH (BOARD OF TRUSTEES)	
Facility Email: WEEKS@KERSHAWHEALTH.ORG	HTL-0101 / 10/31/2014	

Licensed Beds: General: 121 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 121

Number of Activities/Facilities licensed in county of	<u>Kershaw</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>121</u>

County: Lancaster

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
REBOUND BEHAVIORAL HEALTH 134 E REBOUND RD LANCASTER, SC 29720-7712 FAC.#:803-513-6075 MELOSH, BRUCE PH#: 803-313-3705 Facility Email: BRUCE.MELOSH@ACADIAHEALTHCARE.COM	Lancaster / Limited Liability REBOUND BEHAVIORAL HEALTH LLC HTL-0912 / 10/31/2014	42
Licensed Beds: General: 0 Psychiatric: 24 Rehab: 0 Substance Abuse: 18 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
SPRINGS MEMORIAL HOSPITAL 800 W MEETING ST LANCASTER, SC 29720-2298 FAC.#:803-286-1481 DABNEY, JANICE PH#: 803-286-1481 Facility Email: JANICE_DABNEY@CHS.NET	Lancaster / Corporation 800 W MEETING ST LANCASTER, SC 29720-2298 LANCASTER HOSPITAL CORPORATION HTL-0657 / 12/31/2014	217
Licensed Beds: General: 199 Psychiatric: 0 Rehab: 0 Substance Abuse: 18 Other Beds : NICU: 0 Neonatal Special Care: 4		
Certifications:Abortions, Perinatal Level II, JCAHO Accredited		

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 259

Number of Activities/Facilities licensed in county of	<u>Lancaster</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>259</u>

County: Laurens

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

GHS LAURENS COUNTY MEMORIAL HOSPITAL	Laurens / District	76
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22725 HWY 76 E

CLINTON, SC 29325-7527 FAC.#:864-833-9100

D'ALBERTO, RICHARD E PH#: 864-833-9100

GREENVILLE HEALTH SYSTEM

Facility Email: PSAWICKI@GHS.ORG

HTL-0531 / 06/30/2015

Licensed Beds: General: 76 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 76Number of Activities/Facilities licensed in county of Laurens # Lics: 1Number Licensed Units : 76

County: Lee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

LEE CORRECTIONAL INSTITUTION INFIRMARY	Lee / State	20
1204 E CHURCH ST	PO BOX 210382, SCDOC-ACCOUNTS PAYABLE	
BISHOPVILLE, SC 29010-2021 FAC.#:803-896-2400	COLUMBIA, SC 29221-0382	
MCDONALD, YVONNE PH#: 803-896-2400	SC DEPT OF CORRECTIONS	
Facility Email: Not on File	HTL-0873 / 03/31/2015	

Licensed Beds: General: 20	Psychiatric: 0	Rehab: 0	Substance Abuse: 0
Other Beds : NICU: 0	Neonatal Special Care: 0		

Certifications:None

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>20</u>
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Number of Activities/Facilities licensed in county of <u>Lee</u>	# Lics: <u>1</u>
Number Licensed Units : <u>20</u>	

Division of Health Licensing

County: Lexington

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LEXINGTON MEDICAL CENTER 2720 SUNSET BLVD WEST COLUMBIA, SC 29169-4810 FAC. #: 803-791-2115 BIEDIGER, MICHAEL J PH#: 803-791-2000	Lexington / District 2720 SUNSET BLVD WEST COLUMBIA, SC 29169-4810 LEXINGTON COUNTY HEALTH SERVICES DISTRICT INC	414
Facility Email: Not on File HTL-0500 / 03/31/2015		
Licensed Beds: General: 414 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 20		

Certifications: Abortions, Trauma Center Level III, Perinatal Level II

PALMETTO HEALTH BAPTIST PARKRIDGE 400 PALMETTO HEALTH PKWY COLUMBIA, SC 29212-1760 FAC. #: 803-434-7051 RICHTER, SARAH PH#: 803-434-7899	Lexington / Non-Profit Corporation 400 PALMETTO HEALTH PKWY COLUMBIA, SC 29212-1760 PALMETTO HEALTH	76
Facility Email: SARAH.RICHTER@PALMETTOHEALTH.ORG HTL-0913 / 03/31/2015		
Licensed Beds: General: 76 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Perinatal Level I

SOUTH CAROLINA VOCATIONAL REHABILITATION EVALUATION CENTER 1400 BOSTON AVE WEST COLUMBIA, SC 29170-2138 FAC. #: 803-896-6040 PLOTNIK, GLORIA PH#: 803-896-6500	Lexington / State 1400 BOSTON AVE WEST COLUMBIA, SC 29170-2138 SOUTH CAROLINA VOCATIONAL REHABILITATION DEPARTMENT	30
Facility Email: GPLOTNIK@SCVRD.STATE.SC.US HTL-0426 / 09/30/2014		
Licensed Beds: General: 30 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: None

THREE RIVERS BEHAVIORAL HEALTH 2900 SUNSET BLVD WEST COLUMBIA, SC 29169-3422 FAC. #: 803-796-9911 LOWE, ELYSSIA PH#:	Lexington / Limited Liability 2900 SUNSET BLVD WEST COLUMBIA, SC 29169-3422 THREE RIVERS BEHAVIORAL HEALTH LLC	98
Facility Email: ELYSSIA.LOWE@UHSINC.COM HTL-0808 / 10/31/2014		
Licensed Beds: General: 0 Psychiatric: 81 Rehab: 0 Substance Abuse: 17		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 4 Number Licensed Units: 618

Number of Activities/Facilities licensed in county of	<u>Lexington</u>	# Lics: <u>4</u>
	Number Licensed Units :	<u>618</u>

County: Marion

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

CAROLINAS HOSPITAL SYSTEM-MARION	Marion / Corporation	124
2829 E HWY 76	PO BOX 1150	
MULLINS, SC 29574-6035 FAC.#:843-431-2000	MARION, SC 29571-1150	
COPE, DAVID PH#: 843-431-2000	QHG OF SOUTH CAROLINA INC	
Facility Email: DCOPE@MCMED.ORG	HTL-0827 / 07/31/2014	

Licensed Beds: General: 124 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
 Other Beds : NICU: 0 Neonatal Special Care: 2

Certifications: Swing Bed Unit(s), Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 124

Number of Activities/Facilities licensed in county of	<u>Marion</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>124</u>

County: Marlboro

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

MARLBORO PARK HOSPITAL	Marlboro / Limited Liability Limited Partnership	102
1138 CHERAW ST	1138 CHERAW ST	
BENNETTSVILLE, SC 29512-2466 FAC.#:843-454-8400	BENNETTSVILLE, SC 29512-2466	
DAVES, RONNIE PH#:	CHESTERFIELD/MARLBORO LP	
Facility Email: JEFF-REECE@CHS.NET	HTL-0677 / 06/30/2015	

Licensed Beds: General: 94 Psychiatric: 8 Rehab: 0 Substance Abuse: 0
 Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 102

Number of Activities/Facilities licensed in county of	<u>Marlboro</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>102</u>

County: Newberry

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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NEWBERRY COUNTY MEMORIAL HOSPITAL 2669 KINARD ST NEWBERRY, SC 29108-2932 FAC.#:803-276-7570 VIGUS, RONALD J PH#: 803-405-7145 Facility Email: EMILY.METTS@NEWBERRYHOSPITAL.NET	Newberry / County PO BOX 497 NEWBERRY, SC 29108-0497 NEWBERRY COUNTY MEMORIAL HOSPITAL BOARD HTL-0015 / 01/31/2015	90
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Licensed Beds: General: 90 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 90

Number of Activities/Facilities licensed in county of	<u>Newberry</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>90</u>

County: Oconee

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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OCONEE MEDICAL CENTER 298 MEMORIAL DR SENECA, SC 29672-9443 FAC.#:864-482-3100 WARD, JEANNE L PH#: 864-882-3351 Facility Email: JEANNE.WARD@OCONEEMED.ORG	Oconee / Non-Profit Corporation 298 MEMORIAL DR SENECA, SC 29672-9443 OCONEE MEDICAL CENTER HTL-0062 / 08/31/2014	169
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Licensed Beds: General: 169 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Abortions, Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 169

Number of Activities/Facilities licensed in county of	<u>Oconee</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>169</u>

County: Orangeburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTIES 3000 SAINT MATTHEWS RD ORANGEBURG, SC 29118-1496 FAC.#:803-534-2461 DANDRIDGE JR, THOMAS C PH#: 803-395-2200	Orangeburg / County 3000 SAINT MATTHEWS RD ORANGEBURG, SC 29118-1496 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTY (BOARD) HTL-0046 / 05/31/2015	286
Facility Email: BLWILLIAMS@REGMED.COM Licensed Beds: General: 247 Psychiatric: 15 Rehab: 24 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

WILLIAM J MCCORD ADOLESCENT TREATMENT FACILITY 910 COOK RD ORANGEBURG, SC 29118-2124 FAC.#:803-536-4900 FOWLER, RICHARD S PH#: 803-536-4900	Orangeburg / County PO BOX 1166 ORANGEBURG, SC 29116-1166 TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE- BOARD HTL-0619 / 10/31/2014	15
Facility Email: MDENNIS@TCCADA.STATE.SC.US Licensed Beds: General: 0 Psychiatric: 15 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 301

Number of Activities/Facilities licensed in county of	<u>Orangeburg</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>301</u>

County: Pickens

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BAPTIST EASLEY HOSPITAL 200 FLEETWOOD DR EASLEY, SC 29640-2099 FAC.#:864-442-7626 BATCHELOR, MICHAEL L PH#: 864-442-7606 Facility Email: RODDEY.GETTYS@PALMETTOHEALTH.ORG	Pickens / Non-Profit Corporation PO BOX 2129 EASLEY, SC 29641-2129 BAPTIST EASLEY HOSPITAL (NPC) HTL-0743 / 09/30/2014	109
Licensed Beds: General: 109 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 4		

Certifications: Perinatal Level II, JCAHO Accredited

CANNON MEMORIAL HOSPITAL 123 WG ACKER DR PICKENS, SC 29671-2739 FAC.#:864-878-4791 RENTZ, NORMAN G PH#: 864-878-4791 Facility Email: NRENTZ@CMHSC.ORG	Pickens / Non-Profit Corporation PO BOX 188 PICKENS, SC 29671-0188 CANNON MEMORIAL HOSPITAL INC HTL-0076 / 06/30/2014	55
Licensed Beds: General: 55 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: None

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 164

Number of Activities/Facilities licensed in county of	<u>Pickens</u>	# Lics: <u>2</u>
	Number Licensed Units :	<u>164</u>

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
G WERBER BRYAN PSYCHIATRIC HOSPITAL 220 FAISON DR COLUMBIA, SC 29203-3210 FAC.#:803-935-6281 RANDOLPH, RALPH PH#: 803-935-6281 Facility Email: RHR50@SCDMH.ORG	Richland / State 220 FAISON DR COLUMBIA, SC 29203-3210 SC DEPARTMENT OF MENTAL HEALTH HTL-0515 / 02/28/2015	543
Licensed Beds: General: 0 Psychiatric: 543 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
GEO CARE OF SOUTH CAROLINA 7901 FARROW RD COLUMBIA, SC 29203-3220 FAC.#:803-935-0505 LAWRENZ JR, RONALD R PH#: 803-935-0505 Facility Email: RLAWRENZ@GEOCARELLC.COM	Richland / Corporation PO BOX 23587 COLUMBIA, SC 29224-3587 GEO CARE OF SOUTH CAROLINA INC HTL-0756 / 09/30/2014	145
Licensed Beds: General: 145 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
GILLIAM PSYCHIATRIC HOSPITAL 4344 BROAD RIVER RD COLUMBIA, SC 29210-4010 FAC.#:803-896-2271 DRAKE, JAMES STONEY PH#: 803-896-8555 Facility Email: Not on File	Richland / State PO BOX 210382, SCDOC-ACCOUNTS PAYABLE COLUMBIA, SC 29221-0382 SC DEPT OF CORRECTIONS HTL-0431 / 10/31/2014	87
Licensed Beds: General: 0 Psychiatric: 87 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
HEALTHSOUTH REHABILITATION HOSPITAL OF COLUMBIA 2935 COLONIAL DR COLUMBIA, SC 29203-6811 FAC.#:803-254-7777 JACKSON, ANTHONY PH#: 803-254-7777 Facility Email: ANTHONY.JACKSON@HEALTHSOUTH.COM	Richland / Corporation 2935 COLONIAL DR COLUMBIA, SC 29203-6811 HEALTHSOUTH OF SOUTH CAROLINA INC HTL-0504 / 01/31/2015	96
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 96 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:JCAHO Accredited		
INTERMEDICAL HOSPITAL OF SOUTH CAROLINA 1330 TAYLOR ST COLUMBIA, SC 29201-2943 FAC.#:803-296-5425 COLOMBO, ARMANDO E PH#: 803-296-5425 Facility Email: ACOLOMBO@INTERMEDICAL.US	Richland / Corporation PO BOX 11069 COLUMBIA, SC 29211-1069 INTERMEDICAL HOSPITAL OF SOUTH CAROLINA INC HTL-0760 / 10/31/2014	35
Licensed Beds: General: 35 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
KIRKLAND CORRECTIONAL INSTITUTION INFIRMARY 4344 BROAD RIVER RD COLUMBIA, SC 29210-4010 FAC.#:803-896-8567 HERNANDEZ, YOLANDA PH#: Facility Email: Not on File	Richland / State PO BOX 210382, SCDoc-ACCOUNTS PAYABLE COLUMBIA, SC 29221-0382 SC DEPT OF CORRECTIONS HTL-0385 / 10/31/2014	24
Licensed Beds: General: 24 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
MORRIS VILLAGE 610 FAISON DR COLUMBIA, SC 29203-3218 FAC.#:803-935-7100 MCCONNELL, GEORGE PH#: 803-935-7339 Facility Email: GRM95@SCDMH.ORG	Richland / State 610 FAISON DR, 2ND FLOOR A - BUILDING COLUMBIA, SC 29203-3218 SC DEPARTMENT OF MENTAL HEALTH HTL-0516 / 05/31/2015	174
Licensed Beds: General: 11 Psychiatric: 0 Rehab: 0 Substance Abuse: 163 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
PALMETTO HEALTH BAPTIST 1330 TAYLOR ST COLUMBIA, SC 29201-2943 FAC.#:803-296-5678 BRIDGES, JAMES M PH#: 803-296-5678 Facility Email: JULIE.BROWN@PALMETTOHEALTH.ORG	Richland / Non-Profit Corporation 1330 TAYLOR ST COLUMBIA, SC 29201-2943 PALMETTO HEALTH HTL-0739 / 02/28/2015	467
Licensed Beds: General: 363 Psychiatric: 94 Rehab: 0 Substance Abuse: 10 Other Beds : NICU: 8 Neonatal Special Care: 22		
Certifications:Abortions, Perinatal Level III, JCAHO Accredited		
PALMETTO HEALTH RICHLAND 5 RICHLAND MEDICAL PARK DR COLUMBIA, SC 29203-6897 FAC.#:803-434-7000 HICKSON, STAN PH#: 803-296-8506 Facility Email: JULIE.BROWN@PALMETTOHEALTH.ORG	Richland / Non-Profit Corporation 5 RICHLAND MEDICAL PARK DR COLUMBIA, SC 29203-6897 PALMETTO HEALTH HTL-0741 / 02/28/2015	649
Licensed Beds: General: 579 Psychiatric: 60 Rehab: 0 Substance Abuse: 10 Other Beds : NICU: 31 Neonatal Special Care: 38		
Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited, Crisis Stabilization Beds		

Division of Health Licensing

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
PROVIDENCE HOSPITAL 2435 FOREST DR COLUMBIA, SC 29204-2098 FAC.#:803-256-5300 ZARA, GEORGE A PH#: 803-256-5300 Facility Email: Not on File	Richland / Corporation 2435 FOREST DR COLUMBIA, SC 29204-2098 SISTERS OF CHARITY PROVIDENCE HOSPITALS HTL-0820 / 07/31/2014	258
Licensed Beds: General: 258 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

PROVIDENCE HOSPITAL NORTHEAST 120 GATEWAY CORPORATE BLVD COLUMBIA, SC 29203-9611 FAC.#:803-865-4500 ZARA, GEORGE A PH#: 803-256-5300 Facility Email: RYAN.HALL@PROVIDENCEHOSPITALS.COM	Richland / Corporation 2435 FOREST DR COLUMBIA, SC 29204-2098 SISTERS OF CHARITY PROVIDENCE HOSPITALS HTL-0821 / 07/31/2014	74
Licensed Beds: General: 74 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

WILLIAM S HALL PSYCHIATRIC INSTITUTE 1800 COLONIAL DR COLUMBIA, SC 29203-6827 FAC.#:803-898-1593 FORAND, ANGELA Q PH#: 803-935-7339 Facility Email: AQF04@SCDMH.ORG	Richland / State 1800 COLONIAL DR COLUMBIA, SC 29203-6827 SC DEPARTMENT OF MENTAL HEALTH HTL-0514 / 02/28/2015	89
Licensed Beds: General: 0 Psychiatric: 89 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

WILLOW LANE INFIRMARY 4650 BROAD RIVER RD COLUMBIA, SC 29210-4016 FAC.#:803-896-9461 TAVELLA, PATRICK A PH#: Facility Email: PATAVE@SCDJJ.NET	Richland / State 4650 BROAD RIVER RD COLUMBIA, SC 29210-4016 SC DEPARTMENT OF JUVENILE JUSTICE HTL-0274 / 06/30/2014	8
Licensed Beds: General: 8 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 13 Number Licensed Units: 2,649

Number of Activities/Facilities licensed in county of	<u>Richland</u>	# Lics: <u>13</u>
	Number Licensed Units :	<u>2,649</u>

Division of Health Licensing

County: Spartanburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CHILDREN'S HABILITATION CENTER 355 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4699 FAC.#:864-577-1534 NEMITZ RN, MELINDA PH#: 864-577-7675 Facility Email: MNEMITZ@SCSDB.ORG	Spartanburg / State 355 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4699 SC SCHOOL FOR THE DEAF AND THE BLIND HTL-0449 / 06/30/2015	22
Licensed Beds: General: 22 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
MARY BLACK MEMORIAL HOSPITAL 1700 SKYLYN DR SPARTANBURG, SC 29307-1061 FAC.#:803-573-3802 MOYER, DOUGLAS PH#: 864-573-3000 Facility Email: CHANDA.FLYNN@MARYBLACK.ORG	Spartanburg / Ltd. Liability PO BOX 3217 SPARTANBURG, SC 29304-3217 MARY BLACK HEALTH SYSTEM LLC HTL-0704 / 07/31/2014	207
Licensed Beds: General: 174 Psychiatric: 15 Rehab: 18 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		
Certifications:Perinatal Level II, JCAHO Accredited		
PELHAM MEDICAL CENTER 250 WESTMORELAND RD GREER, SC 29651-9013 FAC.#:864-530-2366 KOUSKOLEKAS, ANTHONY T PH#: Facility Email: AKOUSKOLEKAS@SRHS.COM	Spartanburg / District 250 WESTMORELAND RD GREER, SC 29651-9013 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HTL-0905 / 09/30/2014	48
Licensed Beds: General: 48 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:Abortions		
SPARTANBURG HOSPITAL FOR RESTORATIVE CARE 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 FAC.#:864-809-8237 BUTLER, ANITA M PH#: 864-560-3235 Facility Email: ABUTLER@SRHS.COM	Spartanburg / District 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HTL-0685 / 08/31/2014	97
Licensed Beds: General: 97 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		
Certifications:None		
SPARTANBURG MEDICAL CENTER 101 E WOOD ST SPARTANBURG, SC 29303-3072 FAC.#:864-809-6426 HOLSTIEN, BRUCE PH#: 864-560-6107 Facility Email: JPFESAL@SRHS.COM	Spartanburg / District 101 E WOOD ST SPARTANBURG, SC 29303-3072 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HTL-0125 / 03/31/2015	540
Licensed Beds: General: 484 Psychiatric: 56 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 13 Neonatal Special Care: 22		
Certifications:Trauma Center Level I, Perinatal Level III Regional		

County: Spartanburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SPARTANBURG REHABILITATION INSTITUTE 160 HAROLD FLEMING CT SPARTANBURG, SC 29303-4226 FAC.#:864-641-6510 SCHULZ, RICHARD W PH#: 864-641-6510	Spartanburg / Corporation 160 HAROLD FLEMING CT SPARTANBURG, SC 29303-4226 SPARTANBURG REHABILITATION INSTITUTE INC	40
Facility Email: RICHARDSCHULZ@ERNESTHEALTH.COM HTL-0911 / 08/31/2015		
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 40 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 6 Number Licensed Units: 954

Number of Activities/Facilities licensed in county of	<u>Spartanburg</u>	# Lics: <u>6</u>
	Number Licensed Units :	<u>954</u>

County: Sumter

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

TUOMEY	Sumter / Non-Profit Corporation	283
129 N WASHINGTON ST	129 N WASHINGTON ST	
SUMTER, SC 29150-4983 FAC.#:803-774-8601	SUMTER, SC 29150-4983	
SCHWARTZ, MICHAEL J PH#: 809-774-9000	TUOMEY (NPC)	
Facility Email: JILL.WILLIAMSON@TUOMEY.COM	HTL-0096 / 07/31/2014	

Licensed Beds: General: 283 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 22

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 283

Number of Activities/Facilities licensed in county of	<u>Sumter</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>283</u>

County: Union

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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WALLACE THOMSON HOSPITAL 322 W SOUTH ST UNION, SC 29379-2839 FAC.#:864-301-2600 MERRITT, TIM E PH#: 864-427-0351	Union / District PO BOX 789 UNION, SC 29379-0789 UNION HOSPITAL DISTRICT	143
Facility Email: PNEWHOUSE@WALLACETHOMSON.COM	HTL-0017 / 10/31/2014	

Licensed Beds: General: 143 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 143

Number of Activities/Facilities licensed in county of	<u>Union</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>143</u>

County: Williamsburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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WILLIAMSBURG REGIONAL HOSPITAL 500 NELSON BLVD KINGSTREE, SC 29556-4027 FAC.#:843-355-8888 MONSOUR, MITCHELL D PH#: 843-355-8888 Facility Email: SPOSTON@WMBGRH.COM	Williamsburg / Non-Profit Corporation PO BOX 568 KINGSTREE, SC 29556-0568 WILLIAMSBURG REGIONAL HOSPITAL INC HTL-0841 / 10/31/2014	25
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Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 1 Number Licensed Units: 25

Number of Activities/Facilities licensed in county of Williamsburg # Lics: 1
Number Licensed Units : 25

County: York

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HEALTHSOUTH REHABILITATION HOSPITAL OF ROCK HILL 1795 DR FRANK GASTON BLVD ROCK HILL, SC 29732-1190 FAC.#:803-326-3500 PHELPS, BRITTON PH#: 000-000-0000	York / Ltd. Liability 1795 DR FRANK GASTON BLVD ROCK HILL, SC 29732-1190 PIEDMONT HEALTHSOUTH REHABILITATION LLC	50
Facility Email: KIM.CARPENTER@HEALTHSOUTH.COM HTL-0791 / 03/31/2015		
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 50 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

PIEDMONT MEDICAL CENTER 222 S HERLONG AVE ROCK HILL, SC 29732-1158 FAC.#:803-329-1234 MASTERTON, WILLIAM PH#: 803-329-6829	York / Corporation 222 S HERLONG AVE ROCK HILL, SC 29732-1158 AMISUB OF SOUTH CAROLINA INC	288
Facility Email: BILL.MASTERTON@TENETHEALTH.COM HTL-0417 / 01/31/2015		
Licensed Beds: General: 268 Psychiatric: 20 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 12		

Certifications:Abortions, Trauma Center Level III, Perinatal Level II-E, JCAHO Accredited

Totals For Facility/License Type:Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 338

Number of Activities/Facilities licensed in county of	<u>York</u>	# Lics: <u>2</u>
Number Licensed Units :		<u>338</u>

Report Totals:

Total Number of Activities/Facilities licensed 104 Total Number Licensed Units: 15,094